



REG. DATE / OFFICE USE ONLY

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME LEGAL FIRST NAME MIDDLE NAME

PREFERRED NAME DATE OF BIRTH (MO./DAY/YR.) SEX (M/F) AGE CLUB CODE NAME OF CLUB YOU REPRESENT

FATHER'S LAST NAME FATHER'S FIRST NAME MOTHER'S LAST NAME MOTHER'S FIRST NAME

MAILING ADDRESS

CITY STATE ZIP CODE

AREA CODE TELEPHONE NO.

- DISABILITY: A. Legally Blind or Visually Impaired B. Deaf or Hard of Hearing C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment D. Cognitive Disability such as mental retardation, severe learning disorder, autism

- RACE AND ETHNICITY (You may make up to two choices if appropriate): Q. Black or African American R. Asian S. White T. Hispanic or Latino U. American Indian & Alaska Native V. Some Other Race W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO: YOUR CLUB who will then send in 1 check to Indiana Swimming. Only if you are UNATTACHED, should you make check payable to Indiana Swimming

MAIL APPLICATION & PAYMENT TO: YOUR CLUB. If UNATTACHED, send to: Indiana Swimming 201 S. Capitol Ave Suite 410 Indianapolis IN 46225

U.S. CITIZEN? ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? IF YES, WHICH FEDERATION:

REGISTRATION FEE table with rows: USA Swimming Fee \$45.00, IN Fee 7.00, TOTAL DUE \$52.00

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

YEAR LAST REGISTERED IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2008, ENTER THAT CLUB CODE LSC CODE AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB

SIGN HERE x SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

CHECK IF YOU WOULD LIKE TO LEARN MORE ABOUT USA SWIMMING'S COMMUNITY INITIATIVES.

This form should be completed for EVERY ATHLETE MEMBER of Indiana Swimming. This form is to stay with the CLUB. CLUBS are strongly urged to send emails with attached registration files that Hy-Tek's Team Manager can create. There is also a BATCH report to send along with payment. For TM e-registration processes/procedures, please visit www.hy-tek ltd.com to view an eLesson on how to export a batch registration file.

Only if you are a true unattached athlete (you do NOT belong to a club) should you send this completed form with the \$52 payment.

QUESTIONS?: Contact Lynn Kinstler at 317.237.5780 (Monday-Friday 9 am – 5 pm) or lynn@inswimming.org

In order to eliminate asking for duplicate information, the club can delete instructions above and utilize the bottom portion of this word document to ask for additional information from their members.